D S Department of Labor Office of Labor Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30-2006

This report is mandatory under P.L. 88-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT			
1 File Number U 9973	2. Fiscal Year Covered From			
	7/7/2004 Through 72/31/2004			
3 Name and address of person filing	4 Name file number and address of labor organization			
Name Edward & BARNES	Name PipeFiTTEN LOCAL UNION #250			
	Labor Organization File Number 048-054			
PO Box Bidg Room No If any	PO Box Building and Room Number if any			
Street 18355 Souriff svenor ST	Street 18355 SOUTH FIGURION ST.			
City GARDENIA	City Condens 14 (4. 11, 14, 1)			
State CALIFORNIA ZIP Code +4 90248	State CHIFORNIA * ZIP Code +4 90248			
5 Position in labor organization BUSINES MANUER				
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions) A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of				
monetary value from an employer whose employees your organizat 8 Name and address of Employer (including trade name if any)	7 a Nature of Interest, Transaction or Income			
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State ZIP Code + 4				
Signature				
16 Signature and verification The undersigned declares under penalty of submitted in this report (including the information contained in any accompan undersigned a knowledge and belief true correct and complete (See the se	lying documents) has been examined by the signatory and is to the best of the			

Therand E. Barnes on 8/12

Telephone Number

				
Name of Person Filing Edward E. BANK	125	File Number U		
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested				
8 Name and address of Business (including trade name if any) Name Approvint & Towns of Men Trade Name of any Trade Name	9 Business deals with a Labor Organiza b Trust c Employer	ation		
10 If 9 b or 9 c. is checked give trust or employer's name Name Trade Name if any P O Box, Bldg Room No if any	1	of Toing Invita		
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	12 b Amount	F/205.00		
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value				
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment.			
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Name of Person Filing Edward E, BANNE	es	File Number U-		
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10 if 9.b. or 9 c. is checked give trust or employer's name	11 a. Nature of such deal Approximately		mon Training	
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Name of Person Filling Edward E. BANN	ES File Number U				
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested					
8 Name and address of Business (including trade name if any) Name Approving & Transming Investment PO Box Bldg Room No if any Street 18931 Laurel Park Road City Compoun State California 21P Code +4 90220	9 Business deals with a Labor Organization b Trust c Employer				
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C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value					
13 a Name and address of Employer or Labor Relations Consultant (Including trade name if any) Name Trade Name if any PO Box Bidg Room No if any Street City ZIP Code +4	14 a. Nature of payment.				
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